

EXECUTIVE SUMMARY

Prevalence rates for most health risk behaviors were similar to the national medians (Appendix B). However, a few differences were noted as indicated below.

Access to Health Care

Montanans fared worse than more than one-half the states in the United States with more than one in five adults (23%) ages 18 to 64 reporting no health insurance coverage at the time they were interviewed. The proportion of adults in Montana who reported no dental visit within the past year was much higher than the national median (39% versus 30%).

Health Status and Outcomes

The self-reported health status of Montanans (15%) was essentially the same as the nation's median, meaning about one-half the states either fared better or worse than Montanans who said their general health was "fair" or "poor". The proportion of Montanans who reported being overweight was similar to the national median, but for reports of being obese the proportion of Montanans was more than three percentage points lower than the national median. For most other measures of health status or outcomes, the Montana prevalence estimates of chronic conditions, such as cardiovascular disease (heart attack, stroke, angina,) and asthma were also similar to the nation's median. Montana adults reported less clinically diagnosed diabetes than the majority of the states in the US (7% versus $\geq 9\%$).

Risk Factors

Montana adults were less likely to report no leisure time physical than the majority of other states (22% versus $\geq 24\%$). In 2010, heavy drinking and cigarette smoking were similar to the national median. However, binge drinking was substantially higher in Montana than the majority of US states (17% versus $\leq 15\%$).

Preventive Measures

Montana women 40 years of age and older were substantially less likely than the majority of US women in this age group to have a mammogram within the two years prior to being surveyed (67% versus $\geq 76\%$). However, women who reported ever having a pap smear were similar to the US median. Montana's prevalence for men 40 years of age and older who had a prostate specific antigen (PSA) blood test within the preceding two years was the same as the national median (53%). The proportion of Montana adults 50 years of age and older who reported having a fecal occult blood tests (FOBT) within the previous two years was substantially lower than the majority of US states, as was the proportion who reported ever having a sigmoidoscopy or colonoscopy. Influenza vaccination estimates for adults 65 years of age and older were similar to the nation's median but this age group was more likely to ever have had a pneumococcal immunization than the majority of adults nationwide.

Population Subgroups

Certain population subgroups in Montana are at greater risk for premature death and disability than the population as a whole. Young adults (18-24), adults with less education (particularly those who have not completed high school), adults with low household incomes (<\$25,000), and American Indian/Alaska Natives are often at greater risk due to certain health risk behaviors and conditions.

Estimated Number of People at Risk

Approximately 501,000 Montana adults reported 2 or more of the following serious risk factors: current smoking, binge drinking, heavy drinking, BMI ≥ 25 , insufficient sleep, and no leisure time physical activity. Further, about 37,000 Montana adults have 2 or more of the following chronic conditions: current asthma, ever had a heart attack, ever had a stroke, coronary heart disease, and diabetes. Those with multiple chronic conditions tended to have lower educational attainment and lower household income than other Montana adults.